

# LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.



FOR OFFICE USE ONLY

Postmark Date: 12/10/05

Reg. 2006  
M.O.#08-4117402

\$10.00 US

2005 DEC -6 AM 10:30

2005 NOV 25 PM 2:25

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WASHINGTON, DC 20540

### Instructions

1. Print in ink or type.
2. Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
3. Initial registration must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME HENDREN Jonnie R Jr.  
Last First MI

2. BUSINESS PHONE 251-648-5022  
Area Code and Phone Number

3. BUSINESS ADDRESS 335 SPRINGHILL Woods Dr. W Mobile, AL 36688  
Street and No. City State Zip

MAILING ADDRESS SAME AS ABOVE  
Street and No. City State Zip

4. EMPLOYER JAMES HARDIE Building Products, Inc.

5. EMPLOYER'S ADDRESS 26300 LA ALAMEDA Suite 100 Mission Viejo, CA 92691  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name JAMES HARDIE Building Products, Inc.  
Address 26300 LA ALAMEDA, Suite 100, Mission Viejo, CA 92691  
Business or purpose Building Product MANUFACTURER  
Does this person pay you? YES  
If No, who pays you? \_\_\_\_\_

**LOBBYING REGISTRATION FORM**



- 2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
- 3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
- 4. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief, and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

Signature of Lobbyist

